

Voices from the Field: Catherine Corr



Q1. What about young children who have experienced abuse, neglect, and or trauma?

We consider the first six years of a child's life as critical to his/her growth and development. However, we don't often recognize that this same period is also the most vulnerable period for young children. Young children are the most frequent victims of maltreatment. Child maltreatment falls into a number of categories:

- Physical abuse refers to a non-accidental physical injury (e.g., hitting, kicking, burning, etc.) by a parent or other caregiver in the parenting role.
- Neglect is the failure of the parent or caregiver to provide for the child's basic needs—food, shelter, supervision, medical care, and emotional nurturing.
- Sexual abuse refers to not only forcing or coercing a child to engage in sexual activity but also to exploitation through pornography.
- Emotional abuse is usually a pattern of behavior that hurts a child's emotional development (e.g., constant criticism, threats, withholding love, etc.).

Q2. What's the big deal about abuse and disability?

There is a strong connection between disability and abuse. Meaning, if a young child experiences abuse, they have a higher likelihood of developing a disability or developmental delay. If a young child has a disability or developmental delay, they are at a high risk for experiencing abuse and neglect. This connection is important when we think about supporting young children with disabilities.

Q3. How do you support young children with disabilities who have experienced abuse?

When caregivers and parents foster protective factors it can lessen the negative effects of maltreatment. Early childhood professionals can play a large role in this work. By promoting a strong and secure emotional bond between children and their caregivers is critical for children's physical, social, and emotional development, including their ability to form trusting relationships, exhibit positive behaviors, and heal from past traumas. The healing process is not always a clear, straight path, and it takes time. Note many of these practices are good early childhood practices we recommend for all children regardless if they have experienced abuse, neglect or trauma.

- Build strong connections with friends, family, and teachers that can support children during challenges and teach them to think about and consider other people's feelings.
- Allow children to feel their feelings. Teach them how to describe those feelings.
- Be consistent. This will help to teach your child that people can be trusted.
- Be patient. Children's reactions to trauma vary as widely as the types of trauma one can experience. There isn't one solution. (Child Welfare Information Gateway, 2013)

Q4. As an early childhood professional, I know I am a mandated reporter, but how does abuse, neglect, and trauma impact my day-to-day work supporting interactions?

In lots of ways! Coming up, I will give two case examples of how we as early childhood/early intervention professionals supporting interactions also need to be sensitive and responsive to the needs of young children with disabilities who have experienced abuse, neglect, and trauma.

Example 1

Let's consider Interaction Practice 1: Practitioners promote the child's social-emotional development by observing, interpreting, and responding contingently to the range of the child's emotional expressions.

Oscar is a 5-year-old with Down syndrome who was removed from his biological family because of neglect. He was recently placed in a foster home. Oscar's preschool teacher called his foster home to explain that Oscar is regularly coming to school upset. For the past two weeks, Oscar enters the classroom in the morning crying and doesn't actively participate in the classroom activities. Oscar's teacher decided to create a morning routine where she and Oscar have special one-on-one time reading a book in a quiet place to ease him into the morning routine and to make him feel safe and secure. If Oscar's teacher just wanted to ignore this "needy" or "attention-seeking" behavior, she would not be meeting Oscar's needs. In this instance Oscar's teacher not only needed to understand his behavior but she also needed to understand the context of Oscar's life in order to appropriately support him and his emotions in her classroom.

Example 2

Let's consider Interaction Practice 2: Practitioners promote the child's social development by encouraging the child to initiate or sustain positive interactions with other children and adults during routines and activities through modeling, teaching, feedback, or other types of guided support.

Marina was a typically developing 13-month-old living with her mother. While under the supervision of a babysitter one evening, Marina was scalded in a bathtub. Immediately after the incident, Marina was cared for in the emergency room. Shortly after that, Marina began receiving early intervention services. Marina's OT not only needed to understand child development and interaction, she also needed to understand the complex relationship Marina and her mother had because of this incident. After the incident, Marina's mother was extremely depressed and upset. Marina's mother felt any time Marina cried, it was her fault for "not taking better care of her." While Marina's mother had good intentions, Marina's OT had to delicately explain why it was a good thing Marina would cry and express emotions (other than happiness). In this instance, supporting interactions required knowledge of child development as well as understanding the emotionally taxing situation the parent was going through. If the OT ignored this, her interactions and approaches could have been, at best, ineffective and, at worst, inappropriate for Marina and her mother.

No two cases of child abuse and neglect are alike. Every child and family will require flexibility, responsiveness, and astuteness.